

Fill in this information to identify the case:

Debtor Name NJ Mobile Health Care LLC

United States Bankruptcy Court for the: _____ District of New Jersey

Case number: 24-16239-JKS

☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: 11 - April 2025

Date report filed: 05/23/25
MM / DD / YYYY

Line of business: Ambulance

NAISC code: _____

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party:

Louis V. Greco III

Original signature of responsible party



Printed name of responsible party

Louis V. Greco III

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

Yes No N/A

If you answer No to any of the questions in lines 1-9, attach an explanation and label it *Exhibit A*.

- | | | | |
|--|-------------------------------------|--------------------------|-------------------------------------|
| 1. Did the business operate during the entire reporting period? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you paid all of your bills on time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did you pay your employees on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you timely filed all other required government filings? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it *Exhibit B*.

- | | | | |
|---|--------------------------|-------------------------------------|--------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Did any insurance company cancel your policy? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16. Has anyone made an investment in your business? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Debtor Name NJ Mobile Health Care LLC

Case number 24-16239-JKS

17. Have you paid any bills you owed before you filed bankruptcy?

☐ ☒ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☐ ☒ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

\$ 4,452.51

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 44,886.26

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 48,522.52

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.

+ \$ -3,636.26

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ 816.25

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

\$ 0.00

(*Exhibit E*)

Debtor Name NJ Mobile Health Care LLCCase number 24-16239-JKS**4. Money Owed to You**

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables \$ 111,027.26
(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed? 0
27. What is the number of employees as of the date of this monthly report? 0

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 0.00
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 0.00
30. How much have you paid this month in other professional fees? \$ 0.00
31. How much have you paid in total other professional fees since filing the case? \$ 0.00

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	Column A		Column B		Column C
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ <u>45,000.00</u>	—	\$ <u>44,886.26</u>	=	\$ <u>113.74</u>
33. Cash disbursements	\$ <u>40,000.00</u>	—	\$ <u>48,522.52</u>	=	\$ <u>8,522.52</u>
34. Net cash flow	\$ <u>5,000.00</u>	—	\$ <u>-3,636.26</u>	=	\$ <u>8,636.26</u>
35. Total projected cash receipts for the next month:					\$ <u>45,000.00</u>
36. Total projected cash disbursements for the next month:					- \$ <u>40,000.00</u>
37. Total projected net cash flow for the next month:					= \$ <u>5,000.00</u>

Debtor Name NJ Mobile Health Care LLC

Case number 24-16239-JKS

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Exhibit C

NJMHC Monthly Operating Report - April 2025

Account No	Posting Date	Description	Receipts
5800	04/28/2025	PHONE/INTERNET TRNFR REF 1181439L FUNDS TRANSFER FRM DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	100.00
5800	04/28/2025	PHONE/INTERNET TRNFR REF 1180922L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	596.00
5800	04/28/2025	PHONE/INTERNET TRNFR REF 1160728L FUNDS TRANSFER FRM DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	300.00
5800	04/25/2025	BUS MOBILE DEPOSIT	6,000.00
5800	04/25/2025	BUS MOBILE DEPOSIT	5,000.00
5800	04/25/2025	WIRE IN GFT 202504250014699 LOUIS GRECO CE	1,002.00
5800	04/25/2025	WIRE IN GFT 202504250013874 LOUIS GRECO	1,000.00
5800	04/25/2025	PHONE/INTERNET TRNFR REF 1151341L FUNDS TRANSFER FRM DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	2,000.00
5800	04/25/2025	PHONE/INTERNET TRNFR REF 1151341L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	490.00
5800	04/22/2025	RETURN ITEM CCD CMPY ID: 1472319830 AFCO CREDIT CORP PAYMENTS 250421 23684821	4,100.45
5800	04/21/2025	PHONE/INTERNET TRNFR REF 1111033L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	2,241.00
5800	04/15/2025	BUS MOBILE DEPOSIT	591.99
5800	04/15/2025	BUS MOBILE DEPOSIT	400.44
5800	04/15/2025	PHONE/INTERNET TRNFR REF 1050729L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	2,387.30
5800	04/09/2025	PHONE/INTERNET TRNFR REF 0990814L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	847.75
5800	04/09/2025	PHONE/INTERNET TRNFR REF 0990451L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	500.00
5800	04/08/2025	PHONE/INTERNET TRNFR REF 0980530L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	600.06
5800	04/02/2025	PHONE/INTERNET TRNFR REF 0920536L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	150.00
0303	04/30/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898721453*12052961 37~	1,450.02
0303	04/29/2025	BUS MOBILE DEPOSIT	1,264.84
0303	04/29/2025	BUS MOBILE DEPOSIT	166.38
0303	04/28/2025	BUS MOBILE DEPOSIT	367.74
0303	04/28/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898712288*12052961 37~	2,793.91
0303	04/24/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250424 536927960307817	66.61
0303	04/24/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898703859*12052961 37~	370.26
0303	04/21/2025	BUS MOBILE DEPOSIT	55.07
0303	04/21/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898690356*12052961 37~	1,226.35
0303	04/18/2025	BUS MOBILE DEPOSIT	300.00
0303	04/18/2025	BUS MOBILE DEPOSIT	114.38
0303	04/18/2025	BUS MOBILE DEPOSIT	21.19
0303	04/18/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 BTOT DEP 250418 536927960307817	106.48
0303	04/16/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250416 536927960307817	699.00
0303	04/15/2025	BUS MOBILE DEPOSIT	120.31
0303	04/15/2025	BUS MOBILE DEPOSIT	109.16
0303	04/15/2025	BUS MOBILE DEPOSIT	104.83
0303	04/15/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898675093*12052961 37~	2,762.28
0303	04/10/2025	BUS MOBILE DEPOSIT	580.61

Exhibit C

NJMHC Monthly Operating Report - April 2025

Account No	Posting Date	Description	Receipts
0303	04/09/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250409 536927960307817	29.13
0303	04/09/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898658634*12052961 37~	1,318.03
0303	04/07/2025	BUS MOBILE DEPOSIT	435.21
0303	04/07/2025	BUS MOBILE DEPOSIT	132.67
0303	04/07/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250407 536927960307817	103.19
0303	04/07/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898649833*12052961 37~	391.57
0303	04/04/2025	BUS MOBILE DEPOSIT	584.19
0303	04/03/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250403 536927960307817	105.16
0303	04/03/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898641798*12052961 37~	627.51
0303	04/02/2025	BUS MOBILE DEPOSIT	103.19
0303	04/02/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250402 536927960307817	20.00
3201	04/02/2025	PHONE/INTERNET TRNFR REF 0920537L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	50.00
			44,886.26

Exhibit D

NJMHC Monthly Operating Report - April 2025

Account No	Posting Date	Description	Disbursements
5800	04/30/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250430	8.40
5800	04/25/2025 1085	CHECK	11,844.85
5800	04/25/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250425	8.40
5800	04/25/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250425	8.40
5800	04/25/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250425	8.40
5800	04/25/2025	WIRE OUT GFT 202504250017930 AFCCO	4,100.45
5800	04/24/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250424	8.40
5800	04/22/2025 1082	CHECK	1,320.49
5800	04/22/2025 1081	CHECK	506.49
5800	04/21/2025	ACH DEBIT CCD CMPY ID: 1472319830 AFCCO CREDIT CORP PAYMENTS 250421 23684821	4,100.45
5800	04/21/2025	ACH DEBIT CCD CMPY ID: 0000756346 INTUIT * QBooks Onl 250421 5608590	100.00
5800	04/21/2025	ACH DEBIT WEB CMPY ID: 9326170600 EZPASS8882886865 PAYMENT 250421	138.06
5800	04/18/2025	ACH DEBIT CCD CMPY ID: 0000756346 INTUIT * QBooks Onl 250418 4830164	65.00
5800	04/15/2025	ANALYSIS RESULTS CHG ANALYSIS ACTIVITY FOR 03/25	40.00
5800	04/15/2025	FEE BASED CHARGE FEE BASED ACTIVITY FOR 03/25	9.21
5800	04/15/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1080	30.00
5800	04/15/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1073	30.00
5800	04/14/2025 1078	CHECK	2,660.44
5800	04/14/2025 1080	CHECK	506.49
5800	04/14/2025 1073	CHECK	51.63
5800	04/14/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250414	1.00
5800	04/14/2025	PHONE/INTERNET TRNFR REF 1040616L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	1,000.00
5800	04/10/2025	ACH DEBIT CCD CMPY ID: 1082689000 BILL.COM LLC BILLING BILL.COM 02B4JSQUN JFQN50 STMT 250488 40269 NJ MOBILE HE A	136.69
5800	04/09/2025	PHONE/INTERNET TRNFR REF 0990820L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	100.00
5800	04/08/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1079	30.00
5800	04/08/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1077	30.00
5800	04/08/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1074	30.00
5800	04/07/2025 1079	CHECK	390.80
5800	04/07/2025 1077	CHECK	180.62
5800	04/07/2025 1074	CHECK	52.37
5800	04/03/2025 1069	CHECK	85.00
5800	04/03/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250403	8.40
5800	04/01/2025 1075	CHECK	75.77
5800	04/01/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250401	8.40
5800	04/01/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250401	8.40
5800	04/01/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250401	8.40
5800	04/01/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250401	8.70

Exhibit D

NJMHC Monthly Operating Report - April 2025

Account No	Posting Date	Description	Disbursements
0303	04/30/2025	FEE MAINTENANCE CHARGE	15.00
0303	04/30/2025	PHONE/INTERNET TRNFR REF 1201115L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	200.00
0303	04/30/2025	PHONE/INTERNET TRNFR REF 1201110L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	3,000.00
0303	04/28/2025	PHONE/INTERNET TRNFR REF 1180922L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	596.00
0303	04/28/2025	PHONE/INTERNET TRNFR REF 1180915L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	2,200.00
0303	04/25/2025	PHONE/INTERNET TRNFR REF 1151341L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	490.00
0303	04/21/2025	PHONE/INTERNET TRNFR REF 1111033L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	2,241.00
0303	04/18/2025	PHONE/INTERNET TRNFR REF 1080649L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	500.00
0303	04/16/2025	PHONE/INTERNET TRNFR REF 1060719L FUNDS TRANSFER TO DEP XXXXX4901 FROM FUNDS TRANSFER VIA ONLINE	30.00
0303	04/16/2025	PHONE/INTERNET TRNFR REF 1060719L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	30.00
0303	04/15/2025	PHONE/INTERNET TRNFR REF 1050729L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	2,387.30
0303	04/15/2025	PHONE/INTERNET TRNFR REF 1050728L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	375.56
0303	04/14/2025	PHONE/INTERNET TRNFR REF 1021544L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	580.00
0303	04/09/2025	PHONE/INTERNET TRNFR REF 0990814L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	847.75
0303	04/09/2025	PHONE/INTERNET TRNFR REF 0990451L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	500.00
0303	04/08/2025	PHONE/INTERNET TRNFR REF 0980531L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	462.00
0303	04/08/2025	PHONE/INTERNET TRNFR REF 0980530L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	600.06
0303	04/07/2025	PHONE/INTERNET TRNFR REF 0951522L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	585.00
0303	04/03/2025	PHONE/INTERNET TRNFR REF 0930517L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	838.00
0303	04/02/2025	ACH DEBIT CCD CMPY ID: 10621929SM BANKCARD 1929 MTOT DISC 250402 536927960307817	149.74
0303	04/02/2025	PHONE/INTERNET TRNFR REF 0921423L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	3,980.00
0303	04/02/2025	PHONE/INTERNET TRNFR REF 0920537L FUNDS TRANSFER TO DEP XXXXX3201 FROM FUNDS TRANSFER VIA MOBILE	50.00
0303	04/02/2025	PHONE/INTERNET TRNFR REF 0920536L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	150.00
3201	04/30/2025	FEE MAINTENANCE CHARGE	15.00
			48,522.52

Exhibit F
Monthly Operating Report - April 2025

Aging Report										
Current Payor	Trip Count	Current	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 546	Over 546	Total
-- None --	14		10,255.00	2,405.00	3,000.00	-	-	740.00	-	16,400.00
AARP MEDICARE SUPPLEMENT PLAN	22		326.69	765.74	825.59	346.01	224.12	-	71.21	2,559.36
AETNA - COMMERCIAL	1		-	-	1,088.55	-	-	-	-	1,088.55
AETNA - MEDICARE ADVANTAGE	5		8,134.50	-	-	-	-	-	-	8,134.50
AETNA BETTER HEALTH OF NJ - MEDI	3		1,656.38	-	107.14	-	-	-	-	1,763.52
AMERIGROUP NJ / WELLPOINT - MED	6		813.19	201.25	106.48	271.85	-	-	-	1,392.77
BCBS HORIZON NJ - COMMERCIAL	4		1,814.35	120.31	-	-	-	-	-	1,934.66
BCBS HORIZON NJ HEALTH - MEDICA	7		3,995.00	(103.19)	815.00	-	740.00	(106.25)	-	5,340.56
BERGEN NEW BRIDGE MEDICAL CENT	25		170.50	-	-	440.00	5,224.50	401.50	148.50	6,385.00
Bill Patient	65		15,402.49	7,308.82	1,417.29	3,319.28	-	-	-	27,447.88
CHAMPVA	1		-	-	-	87.20	-	-	-	87.20
CHRISTIAN BROTHERS SERVICES/HBS	1		-	-	1,530.00	-	-	-	-	1,530.00
CIGNA HEALTHSPRING - MEDICARE A	1		996.50	-	-	-	-	-	-	996.50
CLOVER HEALTH - MEDICARE ADVANT	3		1,640.00	-	-	1,620.00	-	684.50	-	3,944.50
FIDELIS CARE (FORMERLY WELLCARE)	5		-	212.96	293.24	-	-	-	-	506.20
GHI EMBLEM HEALTH	1		-	112.08	-	-	-	-	-	112.08
HUMANA - MEDICARE ADVANTAGE	1		-	-	1,524.00	-	-	-	-	1,524.00
MAGNACARE	1		-	99.56	-	-	-	-	-	99.56
MEDICAID NJ	5		102.02	160.85	-	-	-	131.70	-	394.57
MEDICARE NJ	24		29,194.00	2,262.50	1,569.00	1,603.50	-	2,731.50	-	37,360.50
MUTUAL OF OMAHA - MEDICARE SUF	2		-	106.48	-	-	115.36	-	-	221.84
NAHGA CLAIM SERVICES	1		-	216.60	-	-	-	-	-	216.60
SAINT MICHAEL'S MEDICAL CENTER	2		-	-	-	-	-	684.10	-	684.10
TRANSAMERICA LIFE	1		-	-	103.68	-	-	-	-	103.68
UNITEDHEALTHCARE - COMMERCIAL	1		1,085.00	-	-	-	-	-	-	1,085.00
UNITEDHEALTHCARE - EMPIRE PLAN (1		105.33	-	-	-	-	-	-	105.33
UNITEDHEALTHCARE - MEDICAID (86	5		1,525.50	-	156.62	1,584.00	-	64.95	-	3,331.07
UNITEDHEALTHCARE - MEDICARE AD	4		275.00	3,520.50	-	-	-	902.00	-	4,697.50
UNITEDHEALTHCARE DUAL SNP - MEI	4		-	-	-	-	-	4,565.50	-	4,565.50
WELLPOINT DUAL/FIDE SNP - MEDICA	2		1,540.00	-	-	-	-	-	-	1,540.00
Totals: Payors: 30	218		79,031.45	17,389.46	12,536.59	9,271.84	5,563.98	2,566.00	9,193.21	135,552.53

Overall Totals										
Current Payor	Trip Count	Current	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 546	Over 546	Total
Totals: Payors: 30	218		79,031.45	17,389.46	12,536.59	9,271.84	5,563.98	2,566.00	9,193.21	135,552.53
Uncollectable VRM										(105,730.97)
										29,821.56
Non-VRM Receivables										81,205.70
Total Receivables										111,027.26

Aging Current Payor

Report Date: 05/04/2025 18:32:03



P.O. Box 558
Wayne, NJ 07474-0558

Last Statement:
Statement Ending:
Page:

March 31, 2025
April 30, 2025
1 of 7

42677 M0656DDA050125070135 07 000000000 171081 007



NJ MOBILE HEALTH CARE LLC
DIP CASE # 24-16239 OPERATING ACCOUNT
575 CORPORATE DR SUITE 525
MAHWAH NJ 07430-2330



Email: contactus@valley.com



Visit Us Online: www.valley.com



Mail To: 1720 Route 23, Wayne, NJ 07470

Account Statement

We have updated the order in which transactions are posted to your account. All credits will be processed first followed by debits in the following order: debit card transactions, Zelle® payments, checks cashed against your account, outgoing wire transfers, internal transfers, ACH debits, checks presented for payment, and all remaining debit transactions.

BUSINESS BANKING CHECKING - XXXXXX5800

SUMMARY FOR THE PERIOD: 04/01/25 - 04/30/25

NJ MOBILE HEALTH CARE LLC

Beginning Balance	+	Deposits & Other Credits	-	Withdrawals & Other Debits	=	Ending Balance
\$94.80		\$28,306.99		\$27,700.11		\$701.68

TRANSACTIONS

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	Beginning Balance			\$94.80
04/01	ACH DEBIT Pirate Ship 8444455854 250401	-\$8.70		\$86.10
04/01	ACH DEBIT Pirate Ship 8444455854 250401	-\$8.40		\$77.70
04/01	ACH DEBIT Pirate Ship 8444455854 250401	-\$8.40		\$69.30
04/01	ACH DEBIT Pirate Ship 8444455854 250401	-\$8.40		\$60.90
04/01	CHECK 1075	-\$75.77		-\$14.87
04/02	PHONE/INTERNET TRNFR REF 0920536L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$150.00	\$135.13
04/03	ACH DEBIT Pirate Ship 8444455854 250403	-\$8.40		\$126.73
04/03	CHECK 1069	-\$85.00		\$41.73
04/07	CHECK 1074	-\$52.37		-\$10.64
04/07	CHECK 1077	-\$180.62		-\$191.26





Account Number:

XXXXXX5800

Statement Date:

04/30/2025

Page :

2 of 7

P.O. Box 558

Wayne, NJ 07474-0558

TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
04/07	CHECK 1079	-\$390.80		-\$582.06
04/08	PHONE/INTERNET TRNFR REF 0980530L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$600.06	\$18.00
04/08	PAID ITEM FEE FOR OVERDRAFT CHECK # 1074	-\$30.00		-\$12.00
04/08	PAID ITEM FEE FOR OVERDRAFT CHECK # 1077	-\$30.00		-\$42.00
04/08	PAID ITEM FEE FOR OVERDRAFT CHECK # 1079	-\$30.00		-\$72.00
04/09	PHONE/INTERNET TRNFR REF 0990451L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$500.00	\$428.00
04/09	PHONE/INTERNET TRNFR REF 0990814L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$847.75	\$1,275.75
04/09	PHONE/INTERNET TRNFR REF 0990820L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$100.00		\$1,175.75
04/10	ACH DEBIT BILL.COM LLC BILLING BILL.COM 02B4JSQUN JFQN50 STMT 250488 40269 NJ MOBILE HE ALTHCARE DIP	-\$136.69		\$1,039.06
04/14	PHONE/INTERNET TRNFR REF 1040616L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$1,000.00		\$39.06
04/14	ACH DEBIT Pirate Ship 8444455854 250414	-\$1.00		\$38.06
04/14	CHECK 1073	-\$51.63		-\$13.57
04/14	CHECK 1080	-\$506.49		-\$520.06
04/14	CHECK 1078	-\$2,660.44		-\$3,180.50
04/15	PHONE/INTERNET TRNFR REF 1050729L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$2,387.30	-\$793.20
04/15	BUS MOBILE DEPOSIT		\$400.44	-\$392.76
04/15	BUS MOBILE DEPOSIT		\$591.99	\$199.23
04/15	PAID ITEM FEE FOR OVERDRAFT CHECK # 1073	-\$30.00		\$169.23
04/15	PAID ITEM FEE FOR OVERDRAFT CHECK # 1080	-\$30.00		\$139.23
04/15	FEE BASED CHARGE FEE BASED ACTIVITY FOR 03/25	-\$9.21		\$130.02
04/15	ANALYSIS RESULTS CHG ANALYSIS ACTIVITY FOR 03/25	-\$40.00		\$90.02
04/18	ACH DEBIT INTUIT * QBooks Onl 250418 4830164	-\$65.00		\$25.02





P.O. Box 558

Wayne, NJ 07474-0558

TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
04/21	PHONE/INTERNET TRNFR REF 1111033L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$2,241.00	\$2,266.02
04/21	ACH DEBIT EZPASS8882886865 PAYMENT 250421	-\$138.06		\$2,127.96
04/21	ACH DEBIT INTUIT * QBooks Onl 250421 5608590	-\$100.00		\$2,027.96
04/21	ACH DEBIT AFCO CREDIT CORP PAYMENTS 250421 23684821	-\$4,100.45		-\$2,072.49
04/22	RETURN ITEM AFCO CREDIT CORP PAYMENTS 250421 23684821 CHECK		\$4,100.45	\$2,027.96
04/22	CHECK 1081	-\$506.49		\$1,521.47
04/22	CHECK 1082	-\$1,320.49		\$200.98
04/24	ACH DEBIT Pirate Ship 8444455854 250424	-\$8.40		\$192.58
04/25	PHONE/INTERNET TRNFR REF 1151341L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$490.00	\$682.58
04/25	PHONE/INTERNET TRNFR REF 1151341L FUNDS TRANSFER FRM DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE		\$2,000.00	\$2,682.58
04/25	WIRE IN 202504250013874 LOUIS GRECO		\$1,000.00	\$3,682.58
04/25	WIRE IN 202504250014699 LOUIS GRECO CE		\$1,002.00	\$4,684.58
04/25	BUS MOBILE DEPOSIT		\$5,000.00	\$9,684.58
04/25	BUS MOBILE DEPOSIT		\$6,000.00	\$15,684.58
04/25	WIRE OUT 202504250017930 AFCO	-\$4,100.45		\$11,584.13
04/25	ACH DEBIT Pirate Ship 8444455854 250425	-\$8.40		\$11,575.73
04/25	ACH DEBIT Pirate Ship 8444455854 250425	-\$8.40		\$11,567.33
04/25	ACH DEBIT Pirate Ship 8444455854 250425	-\$8.40		\$11,558.93
04/25	CHECK 1085	-\$11,844.85		-\$285.92
04/28	PHONE/INTERNET TRNFR REF 1160728L FUNDS TRANSFER FRM DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE		\$300.00	\$14.08
04/28	PHONE/INTERNET TRNFR REF 1180922L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$596.00	\$610.08
04/28	PHONE/INTERNET TRNFR		\$100.00	\$710.08





Account Number:

XXXXXX5800

Statement Date:

04/30/2025

Page :

4 of 7

P.O. Box 558
Wayne, NJ 07474-0558

TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	REF 1181439L FUNDS TRANSFER FRM DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE			
04/30	ACH DEBIT Pirate Ship 8444455854 250430	-\$8.40		\$701.68
Ending Balance				\$701.68

CHECKS IN ORDER

Date	Number	Amount	Date	Number	Amount
04/03	1069	\$85.00	04/07	1079	\$390.80
04/14	1073*	\$51.63	04/14	1080	\$506.49
04/07	1074	\$52.37	04/22	1081	\$506.49
04/01	1075	\$75.77	04/22	1082	\$1,320.49
04/07	1077*	\$180.62	04/25	1085*	\$11,844.85
04/14	1078	\$2,660.44			

(*) Check Number Missing or Check Converted to Electronic Transaction and Listed under the Transaction section.

OVERDRAFT FEES

	Total This Period:	Total Year-To-Date:
Total Overdraft Fees:	\$150.00	\$480.00





Account Number:

XXXXXX5800

Statement Date:

04/30/2025

Page :

5 of 7

P.O. Box 558

Wayne, NJ 07474-0558

Check Images for Account XXXXXX5800

1069

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/18/2025

PAY TO THE ORDER OF Robert Sniace
Eight Five and 00/100 \$ 85.00

FOR Fed - Retirement 1065

922300000379154
4/2/2025
ITC-FE6570
1784
VISIONS FCU
>221375378<
68

04/03/2025 # 1069 \$85.00

1075

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025

PAY TO THE ORDER OF Charles Rawley
Seventy Five and 77/100 \$ 75.77

FOR

7-021407912<
Capitoline, NA
12204246 03312025
Richmond, VA 23238
RDC Deposit *****2193

04/01/2025 # 1075 \$75.77

1073

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025

PAY TO THE ORDER OF Versattive Revenue Management
Fifty One and 63/100 \$ 51.63

FOR

For Deposit Only

04/14/2025 # 1073 \$51.63

1077

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025

PAY TO THE ORDER OF Optimum
One hundred Eighty and 62/100 \$ 180.62

FOR

Wells Fargo Bank - >494044591<
CSC Holdings Inc 07873221675012 at Wells Fargo Bank

04/07/2025 # 1077 \$180.62

1074

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025

PAY TO THE ORDER OF Tolls by Mail
Fifty Two and 37/100 \$ 52.37

FOR Invoice 1819286932452

040425 waalter 54 537291 7 20

7250404058004 0031000429
20250404 537291 009
0000005237 19022 045
010190808324

For Deposit Only
TRIA TOLLS BY MAIL JPMC
CHASE BANK DEPOSIT
ACCOUNT 738032171

04/07/2025 # 1074 \$52.37

1078

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025

PAY TO THE ORDER OF Front Line EHS Billing
Two thousand Six hundred eighty and 44/100 \$ 2,680.44

FOR

For Deposit Only

04/14/2025 # 1078 \$2,680.44



Account Number:

XXXXXX5800

Statement Date:

04/30/2025

Page :

6 of 7

P.O. Box 558

Wayne, NJ 07474-0558

Check Images for Account XXXXXX5800 (Continued)

1079

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025 SS-136212

PAY TO THE ORDER OF Citrix \$ 390.80

Three hundred nity and 80/100

FOR [Signature]

⑆001079⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

PAID TO THE ORDER OF
JP MORGAN CHASE BANK, NA
FOR DEPOSIT ONLY
CHECKS ARE VOID AFTER 60 DAYS
DO NOT WRITE IN THESE SPACES
MICR LINE: ⑆001079⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

04/07/2025

1079

\$390.80

1082

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/21/25 SS-136212

PAY TO THE ORDER OF Access.net Solutions \$ 1,320.49

One Thousand Three hundred twenty and 49/100

FOR [Signature]

⑆001082⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

PAID TO THE ORDER OF
JP MORGAN CHASE BANK, NA
FOR DEPOSIT ONLY
CHECKS ARE VOID AFTER 60 DAYS
DO NOT WRITE IN THESE SPACES
MICR LINE: ⑆001082⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

04/22/2025

1082

\$1,320.49

1080

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025 SS-136212

PAY TO THE ORDER OF Access Solutions \$ 506.49

Five hundred six and 49/100

FOR [Signature]

⑆001080⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

PAID TO THE ORDER OF
JP MORGAN CHASE BANK, NA
FOR DEPOSIT ONLY
CHECKS ARE VOID AFTER 60 DAYS
DO NOT WRITE IN THESE SPACES
MICR LINE: ⑆001080⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

04/14/2025

1080

\$506.49

1085

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 4/24/2025 SS-136212

PAY TO THE ORDER OF Trans unit \$ 11,844.85

Eleen Thousand Eight hundred forty four and 85/100

FOR [Signature]

⑆001085⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

PAID TO THE ORDER OF
JP MORGAN CHASE BANK, NA
FOR DEPOSIT ONLY
CHECKS ARE VOID AFTER 60 DAYS
DO NOT WRITE IN THESE SPACES
MICR LINE: ⑆001085⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

04/25/2025

1085

\$11,844.85

1081

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/28/2025 SS-136212

PAY TO THE ORDER OF Access Solutions \$ 506.49

Five hundred six and 49/100

FOR [Signature]

⑆001081⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

PAID TO THE ORDER OF
JP MORGAN CHASE BANK, NA
FOR DEPOSIT ONLY
CHECKS ARE VOID AFTER 60 DAYS
DO NOT WRITE IN THESE SPACES
MICR LINE: ⑆001081⑆ ⑆021201383⑆ ⑆[Redacted]5800⑆

04/22/2025

1081

\$506.49



Account Number:

XXXXXX5800

Statement Date:

04/30/2025

Page :

7 of 7

P.O. Box 558
Wayne, NJ 07474-0558

To Reconcile Your Account

1. Compare the checks listed as paid on your statement with the entries appearing in your checkbook to insure that they have been properly charged to your account.
2. Create a list of all checks that have been issued by you but have not been paid by Valley (Check(s) Outstanding).
3. Add to your checkbook balance any credit not already recorded in the checkbook.
4. Deduct from your checkbook any service charge or other charges (including automatic deductions) which you have not already recorded in your checkbook.
5. Follow the instructions listed in the Balance Reconciliation section below.

Balance Reconciliation

1 Enter ending statement balance	
2 Add deposits recorded in your checkbook but not shown on this statement.	
3 Total (1 plus 2 above)	
4 Subtract total check(s) outstanding	
5 Balance (3 less 4 should equal checkbook balance)	

Finance Charge Computation For Personal Line Of Credit

The Finance Charge that accrues in any monthly billing period is determined on each day in the monthly billing cycle by multiplying the Daily Periodic Rate by the outstanding principal balance (after subtracting payments and adding advances posted that day); then we add the results of these calculations for the number of days in the billing cycle. The Daily Periodic Rate is the Annual Percentage Rate in effect during the monthly billing cycle divided by 365.

In Case Of Errors Or Questions About Your Personal Line Of Credit Transactions

A. Pursuant To The Federal Fair Credit Billing Act

If you think your statement is wrong or if you need more information about checking transactions on your statement which did not arise from an electronic transfer, write us as soon as possible at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can contact us at 800-522-4100, but doing so will not preserve your rights. In your letter, give us your name and account number and the dollar amount of the suspected error. Describe the error and explain, if you can,

why you believe there is an error. If you need more information, describe the item you are unsure about. You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

B. Under Applicable State Law

If you rely upon the 3 months period provided by state law, you may lose important rights that could be preserved by action more promptly under the federal law described in the first paragraph in this section. State law provisions apply only after expiration of the time period for submitting a proper written notice of a billing error under federal law.

In Case Of Error Or Questions About Your Electronic Transfers (Pursuant to the Electronic Fund Transfer Act. Applicable to personal accounts only; does not pertain to wire transfers.)

If you think your statement or receipt is wrong or if you need more information about an electronic transfer on the statement or receipt, please contact us at 800-522-4100; write us at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. Tell us your name and account number and the dollar amount of the suspected error. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information. We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this or 20 business days if your notice of error involves an electronic fund transfer to or from the account within 30 days after the first deposit to the account was made, we will provisionally credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

For additional terms and conditions applicable to your account statement, please refer to your account agreement.





P.O. Box 558
Wayne, NJ 07474-0558

Last Statement:
Statement Ending:
Page:

March 31, 2025
April 30, 2025
1 of 5

16264 M0656DDA050125070135 08 000000000 194030 005



NJ MOBILE HEALTH CARE LLC
DIP CASE # 24-16239 RECEIVING ACCOUNT
575 CORPORATE DR SUITE 525
MAHWAH NJ 07430-2330



Email: contactus@valley.com



Visit Us Online: www.valley.com



Mail To: 1720 Route 23, Wayne, NJ 07470

Account Statement

We have updated the order in which transactions are posted to your account. All credits will be processed first followed by debits in the following order: debit card transactions, Zelle® payments, checks cashed against your account, outgoing wire transfers, internal transfers, ACH debits, checks presented for payment, and all remaining debit transactions.

VALLEY BASIC BUSINESS CHECKING - XXXXXX0303

SUMMARY FOR THE PERIOD: 04/01/25 - 04/30/25

NJ MOBILE HEALTH CARE LLC

Beginning Balance	+	Deposits & Other Credits	-	Withdrawals & Other Debits	=	Ending Balance
\$4,312.71		\$16,529.27		\$20,807.41		\$34.57

TRANSACTIONS

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	Beginning Balance			\$4,312.71
04/02	ACH CREDIT BANKCARD 1929 MTOT DEP 250402 536927960307817		\$20.00	\$4,332.71
04/02	BUS MOBILE DEPOSIT		\$103.19	\$4,435.90
04/02	PHONE/INTERNET TRNFR REF 0920536L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	-\$150.00		\$4,285.90
04/02	PHONE/INTERNET TRNFR REF 0920537L FUNDS TRANSFER TO DEP XXXXXX3201 FROM FUNDS TRANSFER VIA MOBILE	-\$50.00		\$4,235.90
04/02	PHONE/INTERNET TRNFR REF 0921423L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$3,980.00		\$255.90
04/02	ACH DEBIT	-\$149.74		\$106.16





Account Number:

XXXXXX0303

Statement Date:

04/30/2025

Page :

2 of 5

P.O. Box 558

Wayne, NJ 07474-0558

TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	BANKCARD 1929 MTOT DISC 250402 536927960307817			
04/03	ACH CREDIT NOVITAS HCCLAIMPMT 898641798*12052961 37~		\$627.51	\$733.67
04/03	ACH CREDIT BANKCARD 1929 MTOT DEP 250403 536927960307817		\$105.16	\$838.83
04/03	PHONE/INTERNET TRNFR REF 0930517L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$838.00		\$0.83
04/04	BUS MOBILE DEPOSIT		\$584.19	\$585.02
04/07	ACH CREDIT NOVITAS HCCLAIMPMT 898649833*12052961 37~		\$391.57	\$976.59
04/07	ACH CREDIT BANKCARD 1929 MTOT DEP 250407 536927960307817		\$103.19	\$1,079.78
04/07	BUS MOBILE DEPOSIT		\$132.67	\$1,212.45
04/07	BUS MOBILE DEPOSIT		\$435.21	\$1,647.66
04/07	PHONE/INTERNET TRNFR REF 0951522L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$585.00		\$1,062.66
04/08	PHONE/INTERNET TRNFR REF 0980530L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	-\$600.06		\$462.60
04/08	PHONE/INTERNET TRNFR REF 0980531L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$462.00		\$0.60
04/09	ACH CREDIT NOVITAS HCCLAIMPMT 898658634*12052961 37~		\$1,318.03	\$1,318.63
04/09	ACH CREDIT BANKCARD 1929 MTOT DEP 250409 536927960307817		\$29.13	\$1,347.76
04/09	PHONE/INTERNET TRNFR REF 0990451L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	-\$500.00		\$847.76
04/09	PHONE/INTERNET TRNFR REF 0990814L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	-\$847.75		\$0.01
04/10	BUS MOBILE DEPOSIT		\$580.61	\$580.62
04/14	PHONE/INTERNET TRNFR REF 1021544L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$580.00		\$0.62





Account Number:

XXXXXX0303

Statement Date:

04/30/2025

Page :

3 of 5

P.O. Box 558

Wayne, NJ 07474-0558

TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
04/15	ACH CREDIT NOVITAS HCCLAIMPMT 898675093*12052961 37~		\$2,762.28	\$2,762.90
04/15	BUS MOBILE DEPOSIT		\$104.83	\$2,867.73
04/15	BUS MOBILE DEPOSIT		\$109.16	\$2,976.89
04/15	BUS MOBILE DEPOSIT		\$120.31	\$3,097.20
04/15	PHONE/INTERNET TRNFR REF 1050728L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$375.56		\$2,721.64
04/15	PHONE/INTERNET TRNFR REF 1050729L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	-\$2,387.30		\$334.34
04/16	ACH CREDIT BANKCARD 1929 MTOT DEP 250416 536927960307817		\$699.00	\$1,033.34
04/16	PHONE/INTERNET TRNFR REF 1060719L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$30.00		\$1,003.34
04/16	PHONE/INTERNET TRNFR REF 1060719L FUNDS TRANSFER TO DEP XXXXXX4901 FROM FUNDS TRANSFER VIA ONLINE	-\$30.00		\$973.34
04/18	ACH CREDIT BANKCARD 1929 BTOT DEP 250418 536927960307817		\$106.48	\$1,079.82
04/18	BUS MOBILE DEPOSIT		\$21.19	\$1,101.01
04/18	BUS MOBILE DEPOSIT		\$114.38	\$1,215.39
04/18	BUS MOBILE DEPOSIT		\$300.00	\$1,515.39
04/18	PHONE/INTERNET TRNFR REF 1080649L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$500.00		\$1,015.39
04/21	ACH CREDIT NOVITAS HCCLAIMPMT 898690356*12052961 37~		\$1,226.35	\$2,241.74
04/21	BUS MOBILE DEPOSIT		\$55.07	\$2,296.81
04/21	PHONE/INTERNET TRNFR REF 1111033L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	-\$2,241.00		\$55.81
04/24	ACH CREDIT NOVITAS HCCLAIMPMT 898703859*12052961 37~		\$370.26	\$426.07
04/24	ACH CREDIT BANKCARD 1929 MTOT DEP 250424 536927960307817		\$66.61	\$492.68
04/25	PHONE/INTERNET TRNFR	-\$490.00		\$2.68





P.O. Box 558

Wayne, NJ 07474-0558

TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	REF 1151341L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE			
04/28	ACH CREDIT NOVITAS HCCLAIMPMT 898712288*12052961 37~		\$2,793.91	\$2,796.59
04/28	BUS MOBILE DEPOSIT		\$367.74	\$3,164.33
04/28	PHONE/INTERNET TRNFR REF 1180915L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$2,200.00		\$964.33
04/28	PHONE/INTERNET TRNFR REF 1180922L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	-\$596.00		\$368.33
04/29	BUS MOBILE DEPOSIT		\$166.38	\$534.71
04/29	BUS MOBILE DEPOSIT		\$1,264.84	\$1,799.55
04/30	ACH CREDIT NOVITAS HCCLAIMPMT 898721453*12052961 37~		\$1,450.02	\$3,249.57
04/30	PHONE/INTERNET TRNFR REF 1201110L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$3,000.00		\$249.57
04/30	PHONE/INTERNET TRNFR REF 1201115L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$200.00		\$49.57
04/30	FEE MAINTENANCE CHARGE	-\$15.00		\$34.57
Ending Balance				\$34.57

OVERDRAFT FEES

	Total This Period:	Total Year-To-Date:
Total Overdraft Fees:	\$0.00	\$0.00





Account Number:

XXXXXX0303

Statement Date:

04/30/2025

Page :

5 of 5

P.O. Box 558

Wayne, NJ 07474-0558

To Reconcile Your Account

1. Compare the checks listed as paid on your statement with the entries appearing in your checkbook to insure that they have been properly charged to your account.
2. Create a list of all checks that have been issued by you but have not been paid by Valley (Check(s) Outstanding).
3. Add to your checkbook balance any credit not already recorded in the checkbook.
4. Deduct from your checkbook any service charge or other charges (including automatic deductions) which you have not already recorded in your checkbook.
5. Follow the instructions listed in the Balance Reconciliation section below.

Balance Reconciliation

1 Enter ending statement balance	
2 Add deposits recorded in your checkbook but not shown on this statement.	
3 Total (1 plus 2 above)	
4 Subtract total check(s) outstanding	
5 Balance (3 less 4 should equal checkbook balance)	

Finance Charge Computation For Personal Line Of Credit

The Finance Charge that accrues in any monthly billing period is determined on each day in the monthly billing cycle by multiplying the Daily Periodic Rate by the outstanding principal balance (after subtracting payments and adding advances posted that day); then we add the results of these calculations for the number of days in the billing cycle. The Daily Periodic Rate is the Annual Percentage Rate in effect during the monthly billing cycle divided by 365.

In Case Of Errors Or Questions About Your Personal Line Of Credit Transactions**A. Pursuant To The Federal Fair Credit Billing Act**

If you think your statement is wrong or if you need more information about checking transactions on your statement which did not arise from an electronic transfer, write us as soon as possible at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can contact us at 800-522-4100, but doing so will not preserve your rights. In your letter, give us your name and account number and the dollar amount of the suspected error. Describe the error and explain, if you can,

why you believe there is an error. If you need more information, describe the item you are unsure about. You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

B. Under Applicable State Law

If you rely upon the 3 months period provided by state law, you may lose important rights that could be preserved by action more promptly under the federal law described in the first paragraph in this section. State law provisions apply only after expiration of the time period for submitting a proper written notice of a billing error under federal law.

In Case Of Error Or Questions About Your Electronic Transfers (Pursuant to the Electronic Fund Transfer Act. Applicable to personal accounts only; does not pertain to wire transfers.)

If you think your statement or receipt is wrong or if you need more information about an electronic transfer on the statement or receipt, please contact us at 800-522-4100; write us at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. Tell us your name and account number and the dollar amount of the suspected error. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information. We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this or 20 business days if your notice of error involves an electronic fund transfer to or from the account within 30 days after the first deposit to the account was made, we will provisionally credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

For additional terms and conditions applicable to your account statement, please refer to your account agreement.





P.O. Box 558
Wayne, NJ 07474-0558

Last Statement:
Statement Ending:
Page:

March 31, 2025
April 30, 2025
1 of 2

8759 M0656DDA050125070135 07 000000000 137163 002



NJ MOBILE HEALTH CARE LLC
DIP CASE # 24-16239 PPSF ACCOUNT
575 CORPORATE DR SUITE 525
MAHWAH NJ 07430-2330



Email: contactus@valley.com



Visit Us Online: www.valley.com



Mail To: 1720 Route 23, Wayne, NJ 07470

Account Statement

We have updated the order in which transactions are posted to your account. All credits will be processed first followed by debits in the following order: debit card transactions, Zelle® payments, checks cashed against your account, outgoing wire transfers, internal transfers, ACH debits, checks presented for payment, and all remaining debit transactions.

VALLEY BASIC BUSINESS CHECKING - XXXXXX3201

SUMMARY FOR THE PERIOD: 04/01/25 - 04/30/25

NJ MOBILE HEALTH CARE LLC

Beginning Balance	Deposits & Other Credits	Withdrawals & Other Debits	Ending Balance
-\$9.99	\$50.00	\$15.00	\$25.01

TRANSACTIONS

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
04/02	Beginning Balance			-\$9.99
04/02	PHONE/INTERNET TRNFR REF 0920537L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$50.00	\$40.01
04/30	FEE MAINTENANCE CHARGE	-\$15.00		\$25.01
Ending Balance				\$25.01



OVERDRAFT FEES

	Total This Period:	Total Year-To-Date:
Total Overdraft Fees:	\$0.00	\$0.00





Account Number:

XXXXXX3201

Statement Date:

04/30/2025

Page :

2 of 2

P.O. Box 558
Wayne, NJ 07474-0558

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4. Deduct from your checkbook any service charge or other charges (including automatic deductions) which you have not already recorded in your checkbook.
5. Follow the instructions listed in the Balance Reconciliation section below.

Balance Reconciliation

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3 Total (1 plus 2 above)	
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In Case Of Errors Or Questions About Your Personal Line Of Credit Transactions

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why you believe there is an error. If you need more information, describe the item you are unsure about. You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

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For additional terms and conditions applicable to your account statement, please refer to your account agreement.

